

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000040712

Entity Name: JAMAICAN DELITE FOODS, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1112 N.E. 15TH STREET
CAPE CORAL, FL 33909

New Principal Place of Business:

Current Mailing Address:

1112 N.E. 15TH STREET
CAPE CORAL, FL 33909

New Mailing Address:

1112 N.E. 15TH ST
CAPE CORAL, FL 33909

FEI Number: 65-0678624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, EUPHENA A
1112 NE 15TH ST
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSS, FRANKLIN D
Address: 1112 NE 15TH ST
City-St-Zip: CAPE CORAL, FL 33909

Title: ST () Delete
Name: ROSS, EUPHENA A
Address: 1112 NE 15TH ST
City-St-Zip: CAPE CORAL, FL 33909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROSS, FRANKLIN D
Address: 1112 NE 15TH ST
City-St-Zip: CAPE CORAL, FL 33909

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANKLIN D ROSS

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date